STATEMENT OF ORGANIZATION RECEIVE

POLITICAL ACTION COMMITTEES AND PARTY COMMITTEES 109 WEST 9TH STREET TOPEKA, KANSAS 66612 (See Reverse Side For Instructions) X | Political Action Committee Party Committee This is a (check one) Initial'Statement Amended Statement This is an (check one) x COMMITTEE (PLEASE TYPE OR PRINT) Name Kansas State Council, Political Activity Account Mailing Address (Street, City, State, Zip Code) Business Telephone 316) 522-1591 3830 S. Meridian, Wichita, KS 67217 CHAIRPERSON Name Home Telephone (316) 684-9437 Mark Love Mailing Address (Street, City, State, Zip Code). Business Telephone 316) 522-1591 3830 S. Meridian, Wichita, KS 67217 TREASURER Name Home Telephone 316) 838-8437 Leroy Lehman Mailing Address (Street, City, State, Zip Code) Business Telephone (316 N/A 515 Manlo Dr. Wichita, KS 67204 AFFILIATED OR CONNECTED ORGANIZATIONS Name IAM & AW Mailing Address (Street, City, State, Zip Code) 9000 Machinists Pl., Upper Marlboro, MD 20772 If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors. SIGNATURE: "I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor." 10/29/01 (Signature of Chairperson) (Date)

Governmental Pthics Commission

Rev.2000